

STATE OF MARYLAND
DEPARTMENT OF THE ENVIRONMENT

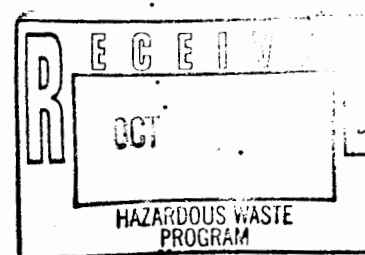
Date 6-14-96

Stats of Md Dept Environment
2500 Browning Hwy
Baltimore, MD 21224

To Hub Mfg Co. MJD 985370196

From BRYAN D WENCK 410-631-3344

- ☐ Please Note & File ☐ To be Signed
☐ For Your Information ☐ Please Comment
☐ Please Note & Return ☐ Please See Me
☐ Please Handle ☐ Please Make Copies
☐ Please answer, Sending me Copy of your letter ☐ Please Circulate
☐ Please Prepare reply for my Signature
☐ Please Send - Copies of this to:



Remarks: THERE IS A DISCREPANCY BETWEEN YOUR 1995 ANNUAL REPORT AND OUR RECORDS.

YOUR REPORT SHOWS THE NAME OF YOUR COMPANY AS:

OUR RECORDS INDICATE THE NAME OF YOUR COMPANY AS:

☒ YOUR REPORT SHOWS THE LOCATION OF YOUR COMPANY AS:

9411 Earley Dr.

☒ OUR RECORDS INDICATE THE LOCATION OF YOUR COMPANY AS:

Rt 3 Leslie Dr.

OTHER

PLEASE COMPLETE THE ATTACHED FORM SO THAT WE CAN UPDATE OUR RECORDS.

Bryan,

I Spoke w/ you on 10/15/96 - our Address changes due to the 911 System.
our Address is 9411 Earley Dr.

Thanks,
John.

RCRIS UNIVERSE MAINTENANCE FORM

EPA ID M D D 9 8 5 3 7 0 1 9 6

Facility Name Hub Manufacturing Co

Source: N A (S) E

Notification Date 8/5/94

Waste Activity	Type	RCRA Reg Status	RCRA Reg Description
Generator	<u>1</u>	<u>N</u>	<u>6</u>
Transporter	_____	_____	_____
TSD	_____	_____	_____
Burner	_____	_____	_____
HWF Market to Blender _____		HWF Other Market _____	
OSO Market to Burner _____		OSO Other Market _____	
SO ACT:			
Burner Type: Utility Boiler _____		Industrial Boiler _____	
		Furnace _____	
Underground Injection Control:			
Recycler:			
Mode of Transportation: Air _____ Rail _____ Highway _____ Water _____			
Other _____			

Process Code Information
Source E or S (circle correct one)

PROCESS CDE/SEQ	COMM AVAIL	AMT TYPE	STATUS	AMOUNT	UOM	NO. OF UNITS	REPORT DATE
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

_____ IR Inspection report	_____	Affidavit from the facility
_____ Revised Notification from the state	<u>X</u>	Affidavit from the state
_____ Revised Notification from the facility	_____	Biennial report
_____ EPA clean closure certificate	_____	Documentation not required
_____ State documentation certifying clean closure		
_____ Other		
		Date to Data Entry <u>138</u>
		Batch Number <u>11/16/94</u>
		Date OAd _____

SEP 14 1994

WASTE MANAGEMENT ADMINISTRATION
HAZARDOUS WASTE PROGRAM
ENFORCEMENT DIVISION

MEMO TO FILE

FACILITY/PROJECT NAME: HUB MANUFACTURING CO., INCEPA IDENTIFICATION NUMBER: MDD 9 | 8 | 5 | 3 | 7 | 0 | 1 | 9 | 6FROM: Bob Boone MDE - HWED DATE: 8-5-94CONVERSATION WITH: John Talley, Jr.TELEPHONE: (301) 790-3038

COMMENTS: Called John Talley, Pres., HUB mfg co., Inc.
concerning CHS Generator Status at "HMC I".
Mr. Talley said that "HMC I" mfgs. custom
boat trailers and although some painting is performed
all paint/lacquer thinner is utilized in their
processes. Mr. Talley further said "HMC I" is
currently a non-CHS handler.

FORWARD TO: _____

✓ REFERRED TO OTHER AGENCY: EPA

FILE _____

OTHER: _____

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

ID — For Official Use Only															
C														T/A	C
W															1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 3	2 F 0 0 5	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature <i>John Talley Jr.</i>	Name and Official Title (type or print) JOHN TALLEY JR. PRESIDENT	Date Signed 11 JUN 90
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EPA Form 8700-12 (Rev. 11-85) Reverse

RECEIVED
GENERAL STATE SECTION

JUN 25 1990

EPA, R3

RECEIVED

JUN 18 1990

HAZARDOUS WASTE DIVISION



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

MDD985370196

INSTALLATION ADDRESS

TALLEY, JR JOHN PRES
HUB MANUFACTURING CO INC
RTE 3 LESLIE DR
HAGERSTOWN MD 21740

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HAGERSTOWN MD 21740